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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P95000072347

1. Corporation Name

Corporation Nam NATIONAL D	DIABETIC SYSTEMS, INC.				
	Qualmon	Mailing Address			
ncipal Place of B		11851 SATH STREET NORTH			
851 54TH STREET NORTH 11851 54TH STREET NORTH DYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411			DO NOT WRITE IN THIS SPACE		
THE THEM DENT				3. Date incorporated or Qualifed	
				09/19/1995	For
		2a. Mailing Address		4. FEI Number Applied 1	
Principal Place	of Business	26		65-0609720 Not Appl	
		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required	
Suite, Apt. #, et	itc.	27		4-00	Be
		City & State		6. Election Campaign Financing S5.00 May Trust Fund Contribution Added to Fee	
City & State		28		8. This corporation owes the current year Intangible	
7:-	Country	Zip	Country	8. This corporation owes the current year. Yes N. Personal Property Tax.	lo
Zip !	25	29 30	<u> </u>	10. Name and Address of New Registered Agent	
L	- Manager of Current	t Registered Agent	81 Name	iu. Kumo	l
		A State of the Sta	1 1	Not Acceptable)	
MCCAR	RTY, DAVID G	. N	82 Street Add	dress (P.O. Box Number is Not Acceptable)	17011191
(NAVI) 11851 (54TH STREET NORTH	,	83		
ROYAL	PALM BEACH FL 33411		[65]		В
			84 City		
1. Pursuant to l	the provisions of Sections 607.050 istered agent, or both, in the State	02 and 607.1508, Florida Statutes of Florida. Such change was aut	, the above-named co horized by the corpora ia Statutes.	rporation submits this statement for the purpose of changing its registron's board of directors. I hereby accept the appointment as register	ered
agent. I am I	familiar with, and accept the obliga	ations of, Section 607.0366, Florid		DATE	
agent. I am I	familiar with, and accept the obliga	ent and title if applicable. (NOTE: R	Registered Agent signature requ	DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
agent. I am I	familiar with, and accept the obligation of registered age of the obligation of registered age of the obligation of the	ations of, Section 607.0366, Florid	Registered Agent signature requ	DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
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ST-ZIP

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in office or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, I am an an annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an annual report is true and accurate and

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Feb 02, 1999 8:00am

Secretary of State

02-02-1999 90020 015 ***150.00